IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Hiroyuki KODAMA et al.

Title:

COATED CUTTING TOOL AND METHOD FOR PRODUCING THE SAME

Prior Appl. No.: 09/821,089

Prior Appl.

03/30/2001

Filing Date:

Examiner:

Unassigned

Art Unit:

Unassigned

CONTINUING PATENT APPLICATION TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herev	vith for filing un	der 37 C.F.R.	§ 1.53(b) is a:
[] Continuation	[X] Division	[] Continua	ation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the aboveidentified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

[] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- [X] Specification, Claim(s), and Abstract (19 pages).
- Declaration and Power of Attorney (2 pages). [X]
- [X] Information Disclosure Statement.
- [**X**] Form PTO/SB/08 (copy of 1 attached reference).
- [X] Preliminary Amendment.





[X] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		ncluded in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee	as rileu		Dasic Fee		Clairis		\$750.00		\$750.00
Total Claims:	5	-	20	=	0	×	\$18.00	=	\$0.00
Independents:	1		3	=	0	×	\$84.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$280.00				=	\$0.00				
							SUBTOTAL:	=	\$750.00
[]	Small	Entit	y Fees A	pply	(subtrac	ct ½	of above):	=	\$0.00
					TOT	AL F	FILING FEE:	=	\$750.00

- [X] A check in the amount of \$750.00 to cover the filing fee is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date AUG 0 4 2003

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